

Amir Rahbar: Good afternoon, everybody. My name is Amir Rahbar. I'm here with Dr. Tony Dickherber and we're here for the Information Center session about the new PAR coming that's out right now, the Innovative Molecular Analysis Technology Development for Cancer Research and Clinical Care. It's PAR13-327.

So what I'm going to do is just give a brief overview of the NIH SBIR program. We'll talk about some of the special initiatives and things that the program does. Tony will give an overview of the IMAT program and then we'll go through the details of the funding announcement that's out.

SBIRs and STTRs are congressionally-mandated programs. The set-aside for this year, for fiscal year 2013 is 2.7, which equates to about \$110 million annually for NCI. So those are the funds that we have available for small businesses for contracts and grants.

So some of the reasons to seek SBIR funding is it provides seed funding for innovative technology development. It's not a loan. No repayment is required. It doesn't—it's non-dilutive funding, so it doesn't impact stock or shares in any way. IP rights are retained by the small business. And it provides recognition, verification, and visibility. It also helps provide leverage in attracting additional funding for support.

So the program is a three-phase program. Phase I is feasibility. Basically these are proof-of-concept studies. They are—the guidelines are for \$150,000 for six months. These guidelines can be exceeded by no more than 50%, there's a hard cap of \$225,000 total costs. And six months are the guidelines for the projects, but they can be extended up to a year as long as it—as long as the project merits that amount of time. Phase II is the research and development part of the plan. This is where we do scale-up that's beyond the feasibility. A commercialization plan is required on how it's to get to market. And the guidelines are \$1 million over two years. Again, you can go 50% over, but the hard cap for that is \$1.5 million for phase IIs. Phase III is—we're using non-SBIR funds. This is the commercialization stage. This is where you would get follow-on funding from venture capital and so forth, but it's not supported by any funds from the government. The—and we also have fast-track applications where you could do a combination of a phase I and a phase II at the same application process and that's—saves time. These require a little bit more preliminary data, but it saves a sort of year in between when you apply for phase I and phase II.

So eligibility, applicants in small business, okay, have made—it has to be an organized, for-profit US business, 500 or fewer employees, including affiliates. The PI's primary employment has to be 50% with the small business at the time of the award and for the duration of the project. It has to be 50% US-owned by individuals and independently-operated or 50% owned and controlled by business concerns that are 50% owned and controlled by one or more individual or 50% owned by multiple venture capital operating companies, hedge funds, private equity firms, or any combination of these.

NCI's primary resource for enabling commercialization of high impact technologies—so why SBIRs are important to NCI, so this is our primary resource for enabling commercialization of high-impact technologies that can benefit patients. We've worked on things such as small molecules, biologics, cancer diagnostics, cancer imaging technologies, e-health and educational tools, and other projects. But these are some of the main categories that we are working, projects we are working with.

So the SBIR Development Center is kind of a new model. We only manage SBIR projects. These are in the forms of grants and contracts. We have a ten-member management team exclusively focused on the administration of NCI's SBIR portfolio. The center is staffed by

program directors with industry experience and a broad range of scientific expertise. We collaborate with staff from other NCI divisions to integrate the small business initiatives with the NCI's scientific priorities.

And here's the team. As you can see, everybody has some sort of scientific and business or industry experience. This enables us to manage and to shepherd the companies that we manage in our portfolio.

So new—the Development Center staff responsibilities are conducting regular outreach events to help recruit more focused, commercially-minded SBIR applications. We coach applicants on developing stronger applications. We provide oversight and active management of projects. We mentor and guide companies throughout the award process and we facilitate matchmaking with potential third party investors and strategic partners.

Some of our initiatives are we have a Bridge Award. Sometimes when privates get past the phase II of the development process, they're not quite at the point where they are able to attract follow-on funding from investors. So we call this sort of crossing the Valley of Death before it gets—this is before you can actually get to a commercialized project. So we have our NCI phase II Bridge Award. It provides up to \$1 million a year for three years to extend promising projects. It's open to any NIH-funded phase II awardees. It accelerates commercialization by incentivizing partnerships with third party investors and strategic partners earlier in the development process. And competitive preference and funding priority is given to applicants that can raise substantial third party funds. So it provides \$1 million a year, but it also requires matching funds from an external investor. And this could be in the form of anything as long as it's not federally-funded or self-funded. So it can come in the form of state funds, private investors, private equity firms, venture capital firms, angel investors, and so forth.

We also have our Investor Forum every 18 months or so. What we do is we take our top 15 to 20 SBIR-funded companies and we let them present in front of about 200 life science like venture capital firms, strategic partners, and any sort of investors, angels. We provide meetings with folks so that they can have one-on-one meetings with the investors. Our last event was in 2012, but—and so we haven't gotten all of the data back on it. But for the previous event that was in 2010, 8 out of the 14 presenting companies closed deals valued at over \$230 million. So this is a unique opportunity for investors to get a look at some of the promising technologies coming out of the SBIR Development Center.

We also just started doing our workshop on federal resources to accelerate commercialization. So what we, you know, we're bringing together NCI SBIR STTR awardees to move forward, to move funded technologies from bench to bedside, so there's the link to it, to our past workshop. We had it on May 7. We had speakers from FDA, CMS, the patent office, USPTO. We have panelists to talk about sources of federal funding and resources, collaborative programs at NIH such as Nexus and so forth. And we also provided one-on-one meetings with the program directors to actually speak with so that the awardees could speak with program directors and other panelists and so forth. So it was an information session to let everybody know what sort of resources are out there for them.

So at this point I'd like to pass the mic over to Dr. Tony Dickherber. He's the director of the IMAT program. He'll give a brief description of that.

Tony Dickherber: Thanks Amir. So as Amir said, this webinar is to discuss the new funding opportunity. And now that he's introduced the Small Business Innovation Research

Development Center that'll host and oversee any awards made out to this solicitation, I'm here to talk a little bit about the technical focus of those solicitations.

So the IMAT program is a longstanding program within the institute that was launched essentially to provide a pipeline of support for very early stage technology development with a focus on improving our capabilities for the molecular and cellular analysis of cancer-relevant biology. As you can see, the two blue bars along that pipeline are our traditional mechanisms with the R21 and the R33 forming a phase I and phase II level of support for that technology. And this new SBIR solicitation will now fit in exactly as it's posted on this slide with the 43 and the 44 accompanying and complementing what those mechanisms are capable of.

And let me stress just right at the outset here that the focus of the solicitation is very much on highly-innovative capabilities, tools that have never really existed before. And the second focus of the review of these kinds of technology applications is the degree of significance that the likelihood that the technologies being developed will actually address a persistent hurdle with regards to clinical care or research in cancer biology or epidemiology or otherwise could introduce entire new fields of research that have not been opened due to the limitations of conventional approaches.

So the—R43/44 is really meant to both certainly support the technology innovations of the small business community with a well-deserved reputation for being a hub of innovation, but it's certainly also meant to offer a new pipeline for accelerating the commercialization of technologies that are supported through our traditional 21 and 33 mechanisms.

Just to give you a sense for some of what the IMAT program has supported in the past, on left column, these are technologies that were funded near the earlier period of the program and as you see that many of these are a veritable who's who of platform technologies used in research laboratories across the country. On the right are a listing of technologies that some are in later stages of development, evidence of uptake by the community already, and some are a little bit more nascent. But certainly all of them on the right side fulfill what we think could be a significant impact to the research community as those on the left.

And, again, as I mentioned before, this is a broad solicitation for any technology that offers novel capabilities for the molecular/cellular analysis of cancer with a focus especially on the early stage development of these technologies. And the program has existed long enough that we have really developed a strong culture of being a high-risk/high-reward program for giving early stage, risky technologies a chance to prove their feasibility and get an early stage level of support.

Again, the focus is exclusively on the technology, what are the capabilities being developed, not on biological hypothesis-based research. And another unique aspect of the program is that we heavily emphasize the use of milestones, quantitative milestones that the investigator him or herself will pose as benchmarks for not only assessing whether or not you're making progress on developing the technology in the way that you would like, but also as it benchmarks those capabilities against conventionally-available or current—otherwise currently-available technologies and approaches, so really looking for an emphasis on the significance for how this particular technology or proposed technology would be an improvement over state-of-the-art.

I want to give you a couple of examples for past well-known successes that the program has supported and then one, a more recent example.

Mark Chee developed both BeadChip and BeadArray under IMAT support as an early stage SBIR award in a previous iteration of the program in which we were offering SBIR-level

support. And then these really formed the basis for the next-gen sequencing platforms that Illumina is very well-known for at this point. Another example is Robert Daniels and Marcel Bruchez took this brand new technology out of the laboratory and figured out how to conjugate capture agents as to specifically antibodies, monoclonal antibodies, to these quantum dot nanotechnologies that are obviously very well-known to much of the community at this point. And for both Mark Chee's project and Robert Daniels' project, these were by definition because they had to be entered into the competition very early stage technology ideas that were risky proposals at the time.

A more recent example is Philip Lee, who took a very interesting idea on a project that he was working on out of Luke Lee's lab at UC Berkeley and created a company called CellASIC Corporation. And they received their first SBIR award through the IMAT program and developed the ONIX platform, which is a highly-capable cell microfluidic perfusion assay for doing cytotoxicity studies that's been now commercialized by EMD Millipore. It's won a number a number of really impressive awards. And we have very high hopes for the level of impact this technology will have. And this is just a few examples of some of the things that have come through past iterations of this particular SBIR solicitation.

And so now we'll move into discussing some of the more unique aspects of what we're looking for out of applications and how these will be considered and reviewed. So there's an obvious marriage of the interests, focus of the IMAT program and what the SBIR Development Center is interested in supporting through the small business community obviously. And the scope of the R21 and R33 is considered certainly an important and useful mechanism for supporting technology development, but for the small business community, there is a unique mechanism, that congressionally set-aside that Amir has already gone through, that obviously form a much more appropriate we think support mechanisms for small business innovators doing this kind of technology development.

So, yeah, technology development projects traditionally do not fare well when going through the standard SBIR review process. So small businesses working in this area are not being served well and lacking a suitable outlet for funding. So while the IMAT program is unique within NCI in that it's structured as a high-risk/high-reward initiative that specifically seeks the development of technologies with the potential to transform the field of cancer research and clinical control, to which, you know, they might apply, they may fund—they fund primarily academic projects. So this solicitation will be the natural companion to the IMAT program in that where IMAT focuses on technology development for the academic community, the SBIR program will focus on the commercialization of technology development from the small business community focusing in this area. So we're looking for IMAT-like projects from companies.

So the purpose of the announcement, the purpose of the solicitation is to provide a mechanism for small businesses to obtain funding for the development of IMAT-like projects as I just said with a focus on commercialization. The announcement is an investigator-initiated funding opportunity announcement and solicitation, so setting innovative, transformative technology development projects in the areas of molecular and cellular analysis technologies that can advance cancer research with a focus on high-risk/high-reward projects. There's also a potential pipeline opportunity, which is to transfer technology development through the IMAT R21/R33 mechanisms directly to the SBIR R43 and R44 mechanisms, then on to commercialization and utilization by the medical community. And we'd just like to say prior participation in the IMAT program is not required for eligibility this—of this FOA, I mean, opportunity announcement. Applicants are expected to indicate the significant attributes and

advances of the proposed technology over currently-available technologies and conventional approaches. So these type of projects coming from the academic community that would go to IMAT and from businesses what we're looking for are IMAT-like projects that SBIR will be supporting.

So it'll be the standard application process. The mechanism for phase I is exploratory pilot phase, proof-of-concept. Requirements are relevance to cancer, quantitative milestones. I'll go over some of this later, you know, truly novel tools or capabilities, improved over the state-of-the-art and commercial feasibility. For phase II, the development/validation phase plus initial commercialization efforts, requirements are advanced development and scaling of the technology, appropriate for cancer researcher/clinicians, validation for clinical research with potential impact in the field, and evidence of technical feasibility completed. So the technologies and tools—basically we're looking for technologies and tools to be used by researchers, you know, new molecular and cellular analysis capabilities unavailable through other approaches or technologies, better, higher resolution, more detailed analysis, improved specificity, selectivity, sensitivity, et cetera, faster, cheaper, you know, things like that, transformative technologies that we can help develop through our program.

So this funding opportunity announcement will support researchers at small business concerns wish to develop and validate their innovative technology in the context of commercially use. These technologies could've been invented, discovered, and/or initially developed with support from any funding source, including but not limited to the NCI IMAT program or may be entirely new invention and applications.

Tech proposed for this FOA are expected to exhibit a high degree of innovation and transformative potential or otherwise demonstrate clear advantages over currently-available technologies as required for applicants to the IMAT program. So prospective applicants are—we tell them or they're advised to visit the IMAT web site to look at the type of projects that they fund so to get a better idea of the type of projects we're looking for for this initiative.

So what are technologies? Novel techniques, materials, instrumentation and devices that offer significant improvements in terms of novel types of cancer-relevant analysis and/or greater resolution, specificity and/or throughput relative to the currently-available methods or tools. The technology is—could be a highly-innovative platform for sample prep and/or processing and for improved downstream analysis. These are also within the scope of the FOA. The proposed technology application must correspond to an important unmet need relevant to cancer research and/or clinical aspects. And these technologies must have some strong potential for commercial success, differentiating there from the IMAT program, although a lot of IMAT projects do have a lot of commercial potential. And that's why we are trying to facilitate this pipeline of IMAT program, IMAT projects into the SBIR program.

So some of the technology areas eventually we're looking for are technologies capable of deciphering basic mechanisms underlying cancer initiation and progression, technologies enabling substantially improved early cancer detection and/or cancer risk assessment, technologies capable of distinguishing, assessing, and/or monitoring cancer stage and progression, technologies to facilitate and/or accelerate the process of drug discovery or development of generic approaches to improve drug delivery, technologies that can facilitate and/or enhance molecular analysis in cancer epidemiology, technologies for sample preparation and/or processing for improved downstream analysis, technologies that offer novel means for assessing general analytic quality to determine sample fitness for purpose for known analytical platforms, and technologies where tools that may help overcome various barriers in research on

the incidence, prevalence, mortality, and burden of cancer among members of underserved populations.

So technology areas, these technology areas included, but are not limited to these. These are areas of interest. These are not all-encompassing. But generally when deciding if your potential project is suitable for this FOA, think of these parameters.

So technologies that are generally not appropriate for this FOA or what we consider nonresponsive would be projects describing milestones that do not indicate advanced capabilities or offer progress towards commercialization, projects proposing software or informatic solutions, database development, data mining, statistical tools, and computer mathematical modeling, projects in which the main thrust of the effort is on exploring biological or clinical hypotheses, you know, traditional hypothesis-driven projects rather than on technology development, projects proposing whole body or in-vivo imaging methods or specific contrast agents, or projects centered on development of specific drugs, therapies, or drug development.

For—generally for phase I projects, preliminary data are not required, but it's strongly encouraged. If there's no preliminary data available, phase I projects must be based on rigorous scientific rationale. I can tell you, technically preliminary data is not required for phase I projects, but it's very rare that projects get funded without it. So if you have preliminary data, put it in there. Phase I projects are expected to prove technical feasibility of the technology and possibly generate a prototype if appropriate in a degree that's sufficient to support the use of the proposed technology in a cancer-relevant application. Project goals must be supplemented with specific, key technical and commercially-relevant milestones and quantitative milestones are required. I'll go over a little bit about quantitative milestones later.

And some things sort of specific for this FOA are innovative, cancer-relevant metrics of success that—so innovative, cancer-relevant technology, so it should be cancer-relevant metrics of success that determine or optimize technical capabilities and its anticipated long-term use to advance cancer research and/or clinical practice. The proposed technology may be targeted technology. The proposed project must be focused on the initial development and application of an innovative molecular analysis technology in a biologically-relevant system. Applications must describe for the needs of basic, preventative, diagnostic, translational, epidemiological, health disparities, and/or clinical cancer research or have potential for broad use in various fields of cancer. So innovation is the key here. There should be substantial improvement and new capabilities, so all approaches to technologies must offer the potential for substantial improvement over conventional approaches and/or add quantitatively new research capabilities not provided by current technologies. There should be transformative potential, define clearly the novelty of the proposed technology and describe its anticipated use in laboratory research and/or a clinical setting. Claimed potential impact is expected to be in line with the specific quantitative milestones. There should be clearly commercial potential. These are SBIRs. So clearly indicate the unmet market need for the proposed technology, describe the marketable product, process, or service, along with information regarding the market size and growth projections. There shouldn't be a question as to what the product is. It should be—and the application should be obvious. And quantitative milestones should be carefully selected and precisely defined. And I'll go over those shortly.

For phase II projects, in general, the phase I results should have already demonstrated the technical feasibility of the invention. Phase II projects are expected to concentrate on further technology development and improvements, so to add IP protection, including work towards filing patent applications if not already done, preparation for regulatory steps as applicable that

might be needed for commercial application of the technology. Project goals must be supplemented with key technical and commercially-relevant milestones as before and quantitative milestones are also required.

So for phase II projects in this, we already talked about the validation of the—so initially for phase I, we were talking about the projects had to be innovative, cancer-relevant technologies. For phase II, they were validation of these technologies, so applications have to focus on the validation and advanced development of an innovative molecular analysis technology that targets the need of basic, preventative, diagnostic, translational, epidemiological, and/or cancer research for broad potential use in cancer research, provide appropriate background, preliminary data to justify that the proposed tech has passed the pilot and development stage and shows promise, describe strategy and specific research steps to evaluate the rigorous—to evaluate and rigorously validate the proposed the technology within the context of its intended use, okay. We talked about substantial improvement over new capabilities and transformative potential. Quantitative milestones I'll go over momentarily.

The phase II projects require a commercialization plan. And I'll go over that in a little bit, too, a little bit later.

All applications—all phase II applications have to have a commercialization strategy for marketing the proposed technology as a process, service, or a combination thereof. The commercialization plan should discuss the clear need and window of opportunity within the specific market, highlight the competitive edge over existing products or services, and outline key steps that would be taken over the period of support towards achieving commercial success. So the ultimate goal is to get these things into the hands of the community, so the commercialization plan is an important part of the application.

So it's going to be scored through the standard review criteria—significance, investigators' innovation, approach, and environment, by abstract significant and innovation because for this announcement there are additional criteria. So for significance, in addition, specific for this FOA, what is the potential for this technology to transform cancer research or clinical practice if the project is successfully completed? That's—these are points you have to get across. Are the expectations in that area realistic and in line with the planned development efforts? Do the proposed milestones support a transformative capacity for a cancer-relevant field of research or clinical care? So this is in addition to the normal significance criteria.

So—and then with innovation, beyond the standard criteria for innovation, specific for this FOA, you have to ask yourself your—the point you have to get across, does the proposed technology offer clear and significant improvement over currently-available methods and platforms? Will the proposed technology offer new possibilities for cancer research or oncological practice relative to the current methods? If the project focuses on a new cancer-relevant application of an existing technology, how innovative is the proposed new type of technology usage? So these are things that are specific to this FOA, along with the normal review criteria of significance, investigators' innovation approach, and environment.

So just a word on the commercialization plan, they ask the applicants, so these are for the phase II applications obviously. All applications must describe the commercialization strategy for marketing the proposed technology as a product, process, service, or a combination thereof. They should discuss the clear need and window of opportunity within this specific market, highlight the competitive edge over existing products or services, and outline the key steps that will be taken over the period of support towards achieving the commercial success. So, again, it's an important part of the application.

A word on quantitative milestones, they should be well-described, obviously quantitative and scientifically-justified, discuss the milestones as a means of judging the success of the phase II project, as well as improving proof-of-principle for justifying further development. These are important when you apply for a phase II project because the success—think of the milestones as success criteria. Did I meet my specific aim? And a quantitative milestone is a good way of doing that. So where appropriate milestones should include the relevant statistical context for the targeted parameter. Listing all milestones in a single location is helpful for the reviewers of—who are reviewing the applications. So you have your specific aim, one, describe what it is, and then have your milestone right afterwards is how I would recommend doing it.

Examples of quantitative milestones, the detection of one cancer cell in 10-to-the-8th normal blood cells, detection of a target analyte and a concentration of (inaudible) per mL in serum, some—these are things you can measure. Demonstrate that the measured analyte is highly-correlated with a Pearson correlation coefficient of R greater than 0.95 for a given human serum sample when analyzed on different days, include mean, standard deviation, relative standard deviation, and for repeatability targets superior to the next-best approach, the detection of one mutated gene in the presence of 1 million wild type copies, the demonstrations of the technology gives the same result in 95 out of 100 assays or demonstration that this technology can be n-fold faster than the current gold standard or we're going to create a technology that's 50% the size or 50% the cost of this that it does the same thing.

So think if while specific aims sort of define the path you intend to follow to your destination, milestones provide a way of determining whether you got there and the quantitative milestones are important. They're useful in determining the merits, like I said before, in the phase II applications.

So acceptable milestones give a quantitative measure of what a successful outcome will be. An example of something that is not an appropriate milestone would be saying I will characterize, compare, or—and/or analyze X protein or X amount of RNA. So this is a qualitative measure that's not useful in determining success.

So some of the opportunities for SBIR or IMAT grantees, first of all, it's still going to be reviewed by a CSR, but we're going to put together a—they are going to put together a special emphasis panel made up of people who have technical expertise and a little bit more business experience. We're going to provide access to NCI-available resources similar to our federal resource meeting that we had before. So we're going to provide information about resources typically needed for this type of technology development, you know, samples, bio specimens, standard materials, molecular chemical libraries, and other technologies and validation resources. So we're hoping to have an information—we're not going to be providing the resources. We're going to have information on how to obtain them. We're going to be working with the FDA, hopefully assemble an interagency team capable of providing specific guidance and feedback. This also provides a mechanism for early dialogue between the FDA and the small business entities because they'll, you know, some of these will eventually want to go through the FDA approval process, especially if it's a diagnostic or a tool.

And what we want to do is provide information sessions and workshops about areas that may not necessarily be familiar with scientists starting a business. Potential topic areas are, you know, will potentially include regulatory activities, technology transfer, business development, in-licensing, out-licensing, commercialization strategies, strategic partner development, and fundraising. We're going to try to have these on a quarterly basis.

Okay, so the requirements, it's a standard application, applications as directed by the SF 424 for SBIRs. We do—when Congress renewed the—or reissued the SBIR program, they added a clause about a direct to R44 allowance. It's not in this FOA just yet, but we are hoping in previous years that when that becomes available that we can institute that. This will help actually further some of the IMAT projects to be transferred from R21s maybe directly to R44s because a lot of times they've already done the feasibility study and when they finished their R33, it's they're almost going backwards to go to an R43 and do a feasibility again, so we're hoping in the future to have a pipeline for the direct to R44.

For phase I, total cost, total cost has everything of \$225,000. And generally these projects are one year. They can go a little bit over a year. It's fine as long as it's justified by the research plan. Some things just take longer than others. So—but, again, total cost is \$225,000, you know, a year, a year and a half is fine. These are feasibility studies. Commercial feasibility should be involved, quantitative milestones. Phase II projects, total cost of no more than \$1.5 million and three years. And these, you know, the time can be played with a little bit, but these dollar amounts are hard caps, so remember that. So these—and phase II is a development and regulatory validation study. It's manufacturer, marketing, scale-up, requires proof of feasibility and a commercialization plan and a demonstration of transformative utility.

These will be R43s and R44s. We are also allowing fast-track applications, new submissions and resubmissions. I already went over the dollar amounts, so I'm not going to go over it. The guidelines are \$150,000. Where we come up with these caps are the Congress mandated no more than 50% over the guideline, so 50% over \$150,000 is \$225,000, 50% over \$1 million is \$1.5 million, so no more than \$225,000 for the R43s and no more than \$1.5 million for the R44s. And the fast-track would obviously be the combination of the caps for both of those.

So, again, the application budget must reflect the actual needs of the proposed project. Don't just ask for \$225,000 because you can go up to \$225,000. That will be, you know, the reviewers will catch onto that and they know how long certain things take. Don't ask for too much time, things like that.

The project period we went over. The application, the upcoming application date is November 4. The next one will be May 28. So basically they're going to be at the same times each year. And the earliest start date for the November 4 application will be July of 2014.

So here are some of the web links for information about this FOA. You can go to that first link. For the full funding announcement, there is the second link. If you want to know more about the SBIR Development Center and some of the things that we do, there is the link for that. And then the link for the IMAT program is on the bottom. I highly suggest you check those—the IMAT program link out because these are the type of technologies we're looking to fund, but in a commercial environment.

So at the end of this thing, we're going to be doing a poll. I would appreciate if each of you just took two minutes and just let us know if you found this informative or not. You—there are—if you have any questions, you can contact myself or Tony. Our information is there. We're also going to be making this webinar available on the web site. It's being recorded and we—I'll try to put the slides up there, too. So does anybody have any questions about the solicitations?

No? Okay. I'd like to thank everybody for their attention today. And, again, if you have any questions, contact Tony or I. The application date is November 4. Tony, do you have anything to add?

Tony Dickherber: No. For any questions at all, don't hesitate to reach out.

Amir Rahbar: All right, thank you, everybody. Have a good day. Thanks for your attention.

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